

BUSINESS LICENSE COMMISSION

COUNTY OF LOS ANGELES

374 KENNETH HAHN HALL OF ADMINISTRATION 500 WEST TEMPLE STREET LOS ANGELES, CA 90012 (213) 974-7691

www.board.co.la.ca.us/blc



MEMBERS

SARA VASQUEZ

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JAMES BARGER

COMMISSIONER

February 4, 2015

Nat Luis Ornelas Rowland High School Raider Education Foundation

HEARING ON APPLICATION FOR BINGO MANAGER BUSINESS LICENSE ID #141755

Dear Applicant:

The Business License Commission will hold a hearing on the above matter on **Wednesday**, **February 11**, **2015** at **9:00 a.m**. in Room 374-A, 500 West Temple Street, Los Angeles, CA 90012. Your presence is requested at this hearing. If you are unable to attend you may authorize a representative to appear on your behalf. The representative must present signed and duly notarized letter giving authorization and the reasons you are unable to appear.

RIGHT TO REPRESENTATION / FOREIGN LANGUAGE SPEAKERS

You have the right to be represented at this hearing by an attorney or other individual of your choosing and at your own cost. In the absence of a representative, you must represent yourself and the hearing will proceed as scheduled.

If you require a translator, you must arrange at your own cost to have present at the hearing either a professional/certified interpreter or other person who is <u>fluent</u> in both English and your native language. If you are unable to locate an interpreter, please contact our office and you will be provided a list of interpreting services.

Parking is available at your cost; a map is enclosed for your convenience. Please note proceedings begin promptly at 9:00 a.m. The Business License Commission reserves the right to reschedule your hearing to a later date for failure to timely appear.

Sincerely,

Sara Vasquez President

Lupe Duron Commission Staff

NOTICE TO PRINTER STATE LAW REQUIRES THAT THIS LEGAL ADVERTISEMENT SHALL BE SET IN TYPE NOT SMALLER THAN NONPAREIL (6 PT.)

CUSTOMER CODE: Z 91085

NEWSPAPER :..... XX XXXX
PUBLISH 3 TIMES

1ST PUBLISHING DATE: XXXXXXXX 2ND PUBLISHING DATE: XXXXXXX 3RD PUBLISHING DATE: XXXXXXX

REPRINTS ORDERED: NONE

NOTICE OF HEARING TO CONDUCT

BINGO MANAGER

NOTICE IS HEREBY GIVEN THAT APPLICATION HAS BEEN MADE TO THE LOS ANGELES COUNTY BUSINESS LICENSE COMMISSION TO CONDUCT

ADVANCE PROOF REQUESTED

| ADDRESS OF PREMISES: | 2000 S. OTTERBEIN AVE |
|----------------------|--------------------------------------|
| | ROWLAND HEIGHTS, CA 91748 |
| NAME OF APPLICANT: | ROWLAND HIGH SCHOOL RAIDER EDUCATION |
| | FOUNDATION / NAT LUIS ORNELAS |
| DATE OF HEARING: | 02/11/2015 |
| TIME OF HEARING: | 09:00 A.M. |

"ANY PERSON HAVING OBJECTIONS TO THE GRANTING OF THE LICENSE MAY, AT ANY TIME PRIOR TO THE DATE ABOVE NAMED, FILE WITH THE BUSINESS LICENSE COMMISSION HIS OBJECTIONS IN WRITING GIVING HIS REASONS THEREFOR, AND HE MAY APPEAR AT THE TIME AND PLACE OF THE HEARING AND BE HEARD RELATIVE THERETO"

OFFICE OF THE COMMISSION:

BUSINESS LICENSE COMMISSION 500 W. TEMPLE STREET, RM 374 LOS ANGELES, CA 90012

RETURN TO:

LOS ANGELES COUNTY TAX COLLECTOR BUSINESS LICENSE SECTION 225 N. HILL STREET RM. 109 LOS ANGELES, CA 90012



KIND OF BUSINESS: BINGO MANAGER

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR



225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012

BUSINESS LICENSE APPLICATION REFERRAL SUMMARY SHEET

| ADDI | RESS | OF BUSINESS: 2000 S OTTERBEIN AV | VE, ROWLAND HEI | GHTS, CA 91748 | | | |
|-------------------------------------|-------|----------------------------------|-----------------|---|-----------|--|--|
| TELEPHONE: (626) 965-3448 | | | | | | | |
| OWNER OF BUSINESS: NAT LUIS ORNELAS | | | | | | | |
| CAL. | DR. | LIC#: | | | | | |
| NAM. | E OF | PERSON FINGERPRINTED: | | | | | |
| FICTI | TIOI | US NAME: ROWLAND HIGH SCHOOL | RAIDER EDU | | | | |
| MAIL | ING | ADDRESS: | | | | | |
| DATE | ETH | AT YOU STARTED BUSINESS: | | | | | |
| PREV | IOU | S OWNER'S NAME, IF KNOWN: | | | | | |
| THIS | IS A | N APPLICATION FOR: NEW LICENSE | | | | | |
| | | | | | | | |
| 1 | _ | | <u>APPROVED</u> | <u>DATE</u> | SIGNATURE | | |
| | 1. | Animal Care & Control | | | | | |
| | 2. | Risk Management | | | | | |
| | 3. | Building & Safety | | | | | |
| | 4. | Fire Department | | *************************************** | | | |
| | 5. | Public Health | | | | | |
| | 6. | Treasurer & Tax Collector | | | | | |
| X | 7. | Business License Commission | | | | | |
| X | 8. | Sheriff Department | YES | 01/29/15 | tchen | | |
| | 9. | Regional Planning Commission | | | | | |
| | 10. | Weights and Measures | | | | | |
| | 11. | Publishing | | | | | |
| | 12. | Public Works - EPD | | | | | |
| X | 13. | Sheriff Fingerprint | YES | 01/29/15 | tchen | | |
| Condit | ions: | | | | | | |



Los Angeles County Treasurer and Tax Collector Application for Business License



Please note: Business License fees are NOT refundable

| BINGO MANAGER BUSINESS Telephone: (2000 S. OTTERBEIN AVE Business Name): ROWLand High School RANDER Education Foundation Sellers Permit # (State Board of Equalization): Business Ownership Structure: Single Owner Partnership LLC Corporation ### (It Cor Corporation, the Information below is required: Incorporate Name: Names of Officers Addresses Titles Names of Officers Addresses Titles Names of Officers Addresses Titles Names of Officers Addresses Treasurer Names of Officers Addresses Treasurer Names of Officers Addresses Treasurer OPANNE THAGAKI Treasurer OPANNE THAGAKI Security OPANNE THAGAKI Security Opanne Telephone: Cell Phone: Email address: Opan Telephone: Cell Phone: Date of Birth: Place of Birth: Opan Telephone: | | 7.0 | NESS INFORMATION ddress of Business: | | |
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| The Information contained herein is true and correct to the best of my knowledge and belief. As a condition of the issuance | Applicant's Full Name: Home Address: Home Telephone: Social Security #: Driver's License or State ID#: | Cell Phone: Date of Birth: | Ornelas Email ad | Blith: | |
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CERTIFICATION OF LOBBYIST REQUIREMENT

Each person or entity who applies for a county contract, permit, grant, license or franchise shall, as a part of the application for such contract, permit, grant, license or franchise, certify that the applicant is familiar with the requirements of this chapter, and that all persons acting on behalf of the applicant have complied therewith and will continue to comply therewith throughout the application process. A person or entity who seeks a contract, permit, grant, license or franchise from the county shall be disqualified therefrom if any lobbyist, lobbying firm lobbyist employer or other person or entity acting on behalf of the person or entity seeking the contract, permit, grant, license or franchise fails to comply with the provisions of this chapter.

Please submit the certification below with your application for a County Business License.

The applicant certifies that:

- 1. I am familiar with the requirements of the County of Los Angeles Lobbyist Ordinance, Los Angeles County Code Chapter 2.160
- 2. All persons acting on behalf of the applicant have complied and will comply with the Lobbyist Ordinances; and

3. The applicant is not on the County Executive Office's List of Terminated Registered

Applicant's Signature

Applicant's Name

Lobbyist Name

(Applies to lobbyist, lobbying firms, and lobbyist employers)

Lobbyist Address

COUNTY OF LCS ANGELES TREASURE AND TAX COLLECTOR

225 N. Hill Street Room 1091 P.O. Box 5: 970, Los Angeles, CA 90054-0970

BUSINESS L CENSE APPLICATION REFERRAL

914-01305

| KIND OF BUSINESS: BINGO MANAGER |
|--|
| ADDRESS OF BUSINESS: 2000 S OTTERBEIN AVE, ROWLAND FEIGHTS, CA 91748 |
| TELEPHONE: (626) 965-3448 |
| OWNER OF BUSINESS: NAT LUIS ORNELAS |
| CAL. DR. LIC.#: |
| NAME OF PERSON FINGERPRINTED: |
| FICTITIOUS NAME: ROWLAND HIGH SCHOOL RAIDER EDU |
| MAILING ADDRESS: |
| DATE THAT YOU STARTED BUSINESS: |
| PREVIOUS OWNER'S NAME, IF KNOWN: |
| THIS IS AN APPLICATION FOR: NEW LICENSE |
| |
| SHERIFF FINGERPRINT |
| LA COUN'TY |
| |
| APPROVAL DENIAL |
| Marionel |
| RECOMMENDATION: |
| |
| |
| SIGNATURE: DATE: 1/29/17 |

DATE |10/08/14

BASIC LICENSE NO. 3531

IDENTIFICATION NUMBER 141755